seis@cdc.gov. Telephone: 770–488–8170.

SUPPLEMENTARY INFORMATION: On January 28, 2022, CDC published a Notice of Intent to prepare an SEIS in the **Federal Register** (87 FR 4603). CDC has prepared a Draft SEIS to analyze the potential impacts of additional proposed components that were not analyzed in the 2014 Final EIS. The proposed components include the addition of a Hospital, Medical, and Infectious Waste Incinerator (HMIWI) in a new laboratory and two emergency standby power diesel generators. The construction of a new laboratory was included in the 2014 Final EIS and will not be re-evaluated in the SEIS.

In accordance with the National Environmental Policy Act (NEPA) as implemented by Council on Environmental Quality (CEQ) regulations (*Code of Federal Regulations* Title 40, Section 1507.3) and HHS environmental procedures, CDC prepared a Draft SEIS to analyze the effects of additional proposed components that were not analyzed in the 2014 Final EIS. The potential impacts of construction and operation of these components on the natural and built environment are being evaluated.

Under NEPA, federal agencies are required to evaluate the environmental effects of their proposed actions and a range of feasible alternatives to the proposed actions prior to making a final decision about what actions to take. The Draft SEIS incorporates the 2014 Final EIS by reference and builds upon that document to focus on specific resource areas that would have potential effects that will differ from those analyzed in the 2014 Final EIS.

Alternatives Considered

CDC analyzed two alternatives in the Draft SEIS: The Proposed Action (Alternative 1) and the No Action Alternative. Alternative 1 consists of the construction and operation of a HMIWI in a new laboratory building and the operation of two emergency standby power diesel generators. The No Action Alternative consists of the construction of the new laboratory without the HMIWI and two emergency standby power generators.

The Draft SEIS evaluates the environmental impacts that may result from Alternative 1 and the No Action Alternative on the following resource categories: air quality, climate change and sustainability, environmental justice, and hazardous/medical/infectious waste. The Draft SEIS identifies measures to mitigate potential adverse impacts.

Availability of the Draft SEIS: Notice of the Availability of the Draft SEIS has been provided to Federal, State, and local agencies and organizations via hard copy letter or electronic mail to the interested parties list. The public is being notified of the availability of the Draft SEIS through this **Federal Register** publication and a notice published in *The Atlanta Journal—Constitution.* The Draft SEIS is available online on the Federal eRulemaking Portal identified by Docket No. CDC–2022–0014. Hard copies of the Draft SEIS are available at the following six locations: Decatur Library, 215 Sycamore Street, Decatur, GA 30030; Toco Hill-Avis G. Williams Library, 1282 McConnell Drive, Decatur, GA 30030; Atlanta-Fulton Public Library, Ponce de Leon Branch, 980 Ponce de Leon Ave. NE, Atlanta, GA 30306; Atlanta-Fulton Public Library, Central Library, One Margaret Mitchell Square, Atlanta, GA 30303; Atlanta-Fulton Public Library, Kirkwood Branch, 11 Kirkwood Rd. NE, Atlanta, GA 30317; and Emory University Robert W. Woodruff Library, 540 Asbury Cir., Atlanta, GA 30322.

Public Meeting: A virtual public meeting will be held on July 27, 2022, from 6:00 p.m. EST to 8:00 p.m. EST. This meeting will occur via the Zoom platform. Please register at *https://us06web.zoom.us/meeting/register/tZ0vduiqrT8oEtfyyzvqDUn_oUl5nS-LvfUE.*

Registration is required prior to the meeting. Once registered, you will receive an email with the meeting link and call-in number.

The meeting will start with a formal presentation and will be followed by a period during which the public can comment or ask questions. A stenographer will transcribe the public meeting. A transcript of the meeting will be made available to the public and will be posted to the public docket at *www.regulations.gov,* identified by Docket No. CDC–2012–0014. CDC will provide a response to comments in the Final SEIS.

Dated: July 1, 2022.

Angela K. Oliver,

Executive Secretary, Centers for Disease Control and Prevention.

[FR Doc. 2022–14518 Filed 7–7–22; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Administration for Children and Families

Submission for OMB Review; National and Tribal Evaluation of the 2nd Generation of the Health Profession Opportunity Grants (OMB #0970–0462)

AGENCY: Office of Planning, Research, and Evaluation, Administration for Children and Families, HHS.

ACTION: Request for public comment.

SUMMARY: The Health Profession Opportunity Grants (HPOG) Program provides healthcare occupational training for Temporary Assistance for Needy Families recipients and other individuals with low incomes. The Office of Management and Budget (OMB) has approved various data collection activities for the National and Tribal Evaluation of the 2nd Generation of HPOG (HPOG 2.0 National and Tribal Evaluation) under OMB #0970–0462. The Administration for Children and Families' (ACF) Office of Planning, Research, and Evaluation (OPRE) is now preparing to conduct the HPOG 2.0 Long-Term Follow-Up Study of HPOG 2.0 participants 5½ years after study enrollment, using a long-term survey (LTS) and administrative data. This notice provides a summary for public review and comment of the use and burden associated with the LTS instrument.

DATES: *Comments due within 30 days of publication.* OMB must make a decision about the collection of information between 30 and 60 days after publication of this document in the **Federal Register**. Therefore, a comment is best assured of having its full effect if OMB receives it within 30 days of publication.

ADDRESSES: Written comments and recommendations for the proposed information collection should be sent within 30 days of publication of this notice to *www.reginfo.gov/public/do/PRAMain.* Find this particular information collection by selecting ''Currently under 30-day Review—Open for Public Comments'' or by using the search function. You can also obtain copies of the proposed collection of information by emailing *OPREinfocollection@acf.hhs.gov.* Identify all requests by the title of the information collection.

SUPPLEMENTARY INFORMATION:

Description: The HPOG 2.0 evaluation of non-tribal programs is assessing the implementation and impacts of HPOG

in non-tribal HPOG programs and will include a cost-benefit analysis. Key participant outcomes of interest include (but are not limited to) educational progress, employment, and earnings.

The HPOG 2.0 Long-Term Follow-Up Study will use survey and administrative data to estimate longer-term (approximately 5½ years after random assignment) program impacts at the local and national level and to explore characteristics of local programs that are associated with more favorable outcomes. By extending data collection to include an LTS, OPRE can address important unanswered questions for policymakers and practitioners. The HPOG 2.0 LTS specifically will provide insights into the long-term impacts of HPOG 2.0 for outcomes that are not captured in administrative records, such as details about educational experiences, characteristics of employment, self-employment, and earnings from jobs not covered in administrative data, receipt of public assistance, physical and mental well-being, and child outcomes. There are two versions of the HPOG 2.0 LTS, the full version (Instrument 21) and a shorter version with critical items of interest only (Instrument 21a). Instrument 21a will be offered to reluctant participants who would otherwise not complete the survey to help maximize response rates and reduce item non-response for the most critical outcomes in the study.

Respondents: HPOG 2.0 impact study participants from the 27 non-tribal HPOG 2.0 grantees (treatment and control group members) who enrolled between September 2017 and January 2018.

Annual Burden Estimates: This request is specific to the HPOG 2.0 Long-Term Follow-Up Survey (LTS) (both the full and critical items only versions). Currently approved materials and associated burden, which we plan to continue to use can be found at: *https://www.reginfo.gov/public/do/PRAICList?ref_nbr=201904-0970-006.*

Instrument	Number of respondents (total over request period)	Number of responses per respondent (total over request period)	Average burden per response (in hours)	Total burden (in hours)	Annual burden (in hours)
Instrument 21a: HPOG 2.0 Long-Term Survey	3,064	1	1	3,064	1,021
Instrument 21a: HPOG 2.0 Long-Term Survey Critical Items Instrument	541	1	0.33	179	60
Total	3,605			3,243	1,081

Estimated Total Annual Burden Hours: 1,081.

Authority: Section 2008 of the Social Security Act as enacted by section 5507 of the Affordable Care Act and section 413 of the Social Security Act, 42 U.S.C. 613.

Mary B. Jones,

ACF/OPRE Certifying Officer.

[FR Doc. 2022–14580 Filed 7–7–22; 8:45 am]

BILLING CODE 4184–72–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Food and Drug Administration

[Docket No. FDA–2018–D–0388]

Hazard Analysis and Risk-Based Preventive Controls for Food for Animals; Guidance for Industry; Availability

AGENCY: Food and Drug Administration, HHS.

ACTION: Notice of availability.

SUMMARY: The Food and Drug Administration (FDA or Agency) is announcing the availability of a final guidance for industry #245 entitled ''Hazard Analysis and Risk-Based Preventive Controls for Food for Animals.'' This final guidance document is intended to help animal food facilities comply with the requirements for hazard analysis and risk-based preventive controls under our regulation ''Current Good Manufacturing Practice, Hazard Analysis, and Risk-Based Preventive Controls for Food for Animals.'' The guidance announced in this notice finalizes the draft guidance of the same title dated January 23, 2018.

DATES: The announcement of the guidance is published in the **Federal Register** on July 8, 2022.

ADDRESSES: You may submit either electronic or written comments on Agency guidances at any time as follows:

Electronic Submissions

Submit electronic comments in the following way:

- *Federal eRulemaking Portal: https://www.regulations.gov.* Follow the instructions for submitting comments. Comments submitted electronically, including attachments, to *https://www.regulations.gov* will be posted to the docket unchanged. Because your comment will be made public, you are solely responsible for ensuring that your comment does not include any confidential information that you or a third party may not wish to be posted, such as medical information, your or anyone else's Social Security number, or confidential business information, such as a manufacturing process. Please note that if you include your name, contact information, or other information that identifies you in the body of your comments, that information will be posted on *https://www.regulations.gov.*
- If you want to submit a comment with confidential information that you do not wish to be made available to the public, submit the comment as a written/paper submission and in the manner detailed (see ''Written/Paper Submissions'' and ''Instructions'').

Written/Paper Submissions

Submit written/paper submissions as follows:

- *Mail/Hand Delivery/Courier (for written/paper submissions):* Dockets Management Staff (HFA–305), Food and Drug Administration, 5630 Fishers Lane, Rm. 1061, Rockville, MD 20852.
- For written/paper comments submitted to the Dockets Management Staff, FDA will post your comment, as well as any attachments, except for information submitted, marked and identified, as confidential, if submitted as detailed in ''Instructions.''

Instructions: All submissions received must include the Docket No. FDA–2018–D–0388 for ''Hazard Analysis and Risk-Based Preventive Controls for Food for Animals.'' Received comments will be placed in the docket and, except for those submitted as ''Confidential Submissions,'' publicly viewable at *https://www.regulations.gov* or at the Dockets Management Staff between 9